

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10816-888 FILING DATE 04-05-04
 APPLICANT(S) _____

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5		4				
6		4				
7	1					
8		1				
9	1					
10		1				
11		1				
12		1				
13	1					
14	1					
15		1				
16		2				
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50						
TOTAL IND.	5					
TOTAL DEP.	18					
TOTAL CLAIMS	23					

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